

CITY OF CHICOPEE APPLICATION FOR EMPLOYMENT

The City of Chicopee is an Affirmative Action/Equal Employment Opportunity Employer

All applications must be returned to the Human Resources Department located at Chicopee City Hall, 274 Front Street, 4th Floor, Chicopee, MA 01013. Applicants are considered for all positions without regard to race, color, religion, gender orientation, national origin, age, marital or veteran status, or the presence of a non-job-related medical condition or handicap.

Complete all sections (even if submitting a resume). Be sure to sign/date. Please Print.

Date of Application:	Job Po	Job Posting Number (required)		
Position Applied For:				
	ement Friend nent Agency Other:			
	PERSONAL INFOR	RMATION		
Name:				
Last	First		MI	
Address:				
Number and Street	City	State	Zip code	
Telephone Number : ()	Cell Ph	one Number: ()		
Email:_				
Are you prevented from lawfull	y becoming employed in	n this country because o	of Visa or Immigration	
Status? Yes □ No □ (Proof o	of citizenship or immigra	ation status will be requ	uired upon employment).	
If under 18 years of age, can you	u furnish a work permit	? Yes □ No) 🗆	
Have you ever been employed v	with the City before?	Yes 🗆 No	D 🗆	
If yes, when?		_ In what department?		
Are you available to work?	ı full-time □ nart-tin	ne □ other		
If you were hired, when could y				
Are you employed now?	es 🗆 No May we cor	ntact your present emp	loyer? 🗆 Yes 🗆 No	
Do you have an immediate fami	ily member (i.e. spouse,	mother, father, sibling	, or child) working for the	
City? □ Yes □ No If yes, Emp				

EDUCATION			
Name/Location	Course of Study	Graduate? □ Yes □ No	Degree
High School			
		□ Yes □ No	
College			
Graduate School		□Yes □ No	
Other (Business, Technical, etc.)			
Special Skills: Please indicate below any	special skills, training or license	s that you possess:	
Driver's License:			
Do you have a valid driver's license?	□ Yes □ No		
Do you have a valid commercial license?	□ Yes □ No		
Driver's license number:	State of Issue:_		
Have you had any motor vehicle acciden	ts during the past three years?	□ Yes □ No	
Have you had any moving violations duri Do you have any other specialized motor	• ,	□ Yes □ No what?	
1	EMPLOYMENT HISTORY		
List most current position first. V	erifiable volunteer work and military	service may be included.	
#1. Employer's name:		Ending Salary	
Address:		Telephone	
Job Title:	Worked fro	m:to:	
$Immediate\ supervisor's\ name\ and\ title: _$			
Describe the work you performed:			
Reason for leaving:May w	e contact this employer? Yes No		

#2. Employer's name:	Ending Salary
Address:	Telephone
Job Title:	to:to:
Immediate supervisor's name and title:	
Describe the work you performed:	
Reason for leaving:	
May we con	atact this employer? Yes No
#3. Employer's name:	Ending Salary
Address:	Telephone
Job Title:	to:to:to
Immediate supervisor's name and title:	
Describe the work you performed:	
Reason for leaving:	
	ntact this employer? Yes No
#4. Employer's name:	Ending Salary
Address:	Telephone
Job Title:	to:to
Immediate supervisor's name and title:	
Describe the work you performed:	
Reason for leaving:	
May we con	atact this employer? Yes No

Professional References: Please pro	vide professional and/or business references only.
#1. Name	Phone
Address	Position
#2. Name	Phone
Address	Position
#3. Name	Phone
Address	Position
	AGREEMENT
	ion for employment is true and complete to the best of my knowledge. In the event of nisleading information given in my application or interview(s) may result in discharge
my education, past employment history a current employers (if applicable) and pre	s contained in this application and the release of any pertinent information regarding and background. I authorize the City of Chicopee all references, persons, schools, my vious employers and organizations named in this application, unless otherwise stated, ant information that may be required to arrive at an employment decision. I it is for the City of Chicopee's use only.
furnishing information from any and all li	d exonerate the City of Chicopee, its agents and representatives, and any person so abilities of every nature and kind arising out of the furnishing or inspection of such on or the investigations made by or on behalf of the City of Chicopee.
	I agree to take a physical examination, which may include testing for drugs or a and recognize that any offer of employment may be contingent upon the results of
	by the City is conditional upon my ability to establish employment eligibility under the 1986 within three days of the date of hire.
	derstand the foregoing and seek employment under these conditions. I certify that the is information can be used for the purpose of processing my employment application.
Signature of Applicant:	Date:
	fferent union agreements and Civil Service requirements. Unless otherwise stated on

The City of Chicopee recognizes many different union agreements and Civil Service requirements. Unless otherwise stated on the job description, all persons are employed on an "at-will" basis. Consequently, the City of Chicopee has the right to change the terms or conditions of employment, including discharging an employee without notice and without cause. No one has the authority to offer or grant any persons employment on any other terms unless specific in writing by employment contract, collective bargaining agreement or Civil Services mandate.

Discrimination against any person in any practice or procedure in advertising, recruitment, referrals, testing, hiring, transfer, promotion or any other term, condition or privilege of employment which limits or adversely affects employment opportunities, because of political or religious opinions or affiliations, or because of race, color, sex, sexual orientation, national origin, marital status, pregnancy, parenthood, age or handicap which is unrelated to the person's occupational qualifications or any other non-merit factor which is not a bona fide occupational qualification is prohibited.

It is unlawful in Massachusetts to require a lie detector test as a condition of employment or continued employment. An employer who violates that law shall be subject to criminal penalties and civil liabilities.



CITY OF CHICOPEE

EQUAL EMPLOYMENT OPPORTUNITY INFORMATION REQUEST

In accordance with the City of Chicopee affirmative action policy, we request your VOLUNTARY completion of this questionnaire. In no way will the information be used to discriminate against or to show preference for any applicant in the hiring decision. NAME:_____DATE:____ POSITION APPLIED FOR: Information on this position was made available to me from the following source: □ U.S. OTHER (country) CITIZENSHIP **Ethnic Data:** The categories below should not be interpreted as scientific or anthropological in nature. They were developed by the federal government to provide for the collection and use of compatible and exchangeable ethnic data. American Indian or Alaskan Native (a person having origins in any of the original people of North America and who maintains cultural identification through tribal affiliation or community recognition.) African American (a person who is not Hispanic in origin but having origins in any of the original peoples of Central or South Africa.) Asian or Pacific Islander (a person having origins in any of the original peoples of the Far East, Southeast Asia, and the Indian sub-continent of the Pacific Isles.) ☐ Hispanic (a person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture regardless of race.) □ White (a person who is not of Hispanic origin but having origins in any of the original peoples of Europe, North Africa, or the Middle East.) Cape Verdean (a person not of Hispanic origin but having origins in the peoples of the Cape Verde Islands.) SEX: □ Female Male DATE OF BIRTH: Are you a Veteran? □ Yes □ No

If yes, dates of service_____